



# Fax

<b>Attention:</b> Mail Stop ISSUE FEE	<b>From:</b> Travis Dodd
<b>Fax:</b> (571) 273-2885	<b>Fax:</b> (818) 833-2065
<b>Examiner's Phone:</b>	<b>Phone:</b> (818) 833-2014
<b>Company:</b> United States Patent and Trademark Office	<b>Company:</b> Quallion LLC
<b>Re:</b> Application Serial No. 10/666,379	<b>Pages:</b> 8
Filing Date: September 17, 2003	
Confirmation No. 8949	
<b>Date:</b> April 21, 2008	
Inventor(s): David Skirlo	
Examiner: Thomas Parsons	
Group Art Unit: 1795	
for ELECTRIC BATTERY ASSEMBLY AND METHOD OF MANUFACTURE	
Our File No. Q137-US10	

☐ Urgent ☒ For Review ☐ Please Comment ☐ Please Reply ☐ Please Recycle

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I hereby certify that the following documents are being facsimile transmitted to the United States Patent and Trademark Office, Fax No. 571-273-2885 on April 21, 2008:

- Transmittal of Payment of Issue Fee (Small Entity) (in duplicate)
- Fee Transmittal (in duplicate)
- PTOL-85 (Rev. 11/03) Part B. – Fee(s) Transmittal (in duplicate)
- Form PTO-2038, credit card authorization

Lisa K. Robbins

(Name of Person Signing Certificate)

(Signature)

### Quallion LLC

PO Box 923127, Sylmar, CA 91392-3127 • PH: (818) 833-2000 • FAX: (818) 833-2065

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# TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission	Application Number	10/666,379	
	Filing Date	September 17, 2003	
	First Named Inventor	Hisashi Tsukamoto et al.	
	Group Art Unit	1795	
	Examiner Name	Thomas Parsons	
		Attorney Docket Number	Q137-US10

## ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Authorized Amendment After Final Affidavits/declaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement Certified Copy of Priority Document(s) Response to Missing Parts/ Incomplete Application Response to Missing Parts under 37 CFR 1.52 or 1.53	Assignment Papers (for an Application) Drawing(s) Licensing-related Papers Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence Address Terminal Disclaimer Request for Refund CD, Number of CD(s)	After Allowance Communication to Group Appeal Communication to Board of Appeals and Interferences Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <input checked="" type="checkbox"/> Issue Fee Transmittal
Remarks		

Customer Number or Bar Code Label

31815

(Insert Customer No. or Attach bar code label here)

The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account No. 50-0921. A duplicate copy of this sheet is enclosed.

Respectfully submitted,

Dated: 4/21/2008

Phone: (818) 833-2003  
Fax: (818) 833-2065

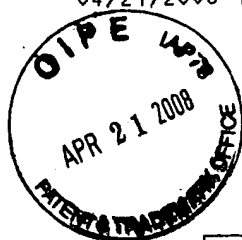
By:

Travis Dodd  
Attorneys for Applicant(s)  
P.O. Box 923127  
Sylmar, CA 91392-3127

## CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner of Patents and Trademarks, Washington, DC 20231 on this date:

Typed or printed name	TRAVIS DODD		
Signature		Date	



## FEE TRANSMITTAL

Attorney Docket No.	Q137-US10
First Named Inventor:	Tsukamoto, Hisashi et al.
Application Number	10/666,379
Filing Date:	September 17, 2003
Examiner Name:	1795
Group/Art Unit:	Thomas Parsons

<b>TOTAL AMOUNT OF PAYMENT:</b>	<b>\$ 1,020.00</b>
<b>METHOD OF PAYMENT (check One)</b>	1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and/or credit any over payment to: Deposit Account No.: 50-0921 Deposit Account Name: Quallion LLC  <input checked="" type="checkbox"/> Charge any Additional Fee Required Under 37 CFR 1.16 and 1.17  2. <input checked="" type="checkbox"/> Payment Enclosed: <input type="checkbox"/> Check <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Other - Credit Card

## 2. UTILITY Basic Filing Fee &amp; Claims

(1) For	(2) No. filed	(3) No. extra	(4) Large Entity	(5) Small Entity	(6) Calculations
Basic Filing Fee	XX	XX	\$310.00	\$155.00	\$0.00
Total Claims	29 - 29 =	0	X \$50.00	X \$25.00	\$75.00
Independent Claims	1 - 3 =	0	X \$210.00	X \$105.00	\$0.00
Multiple Dependent Claim(s) (if applicable)			\$370.00	\$185.00	\$0.00
Total of above Calculations =					\$0.00

Basic Filing Fee	Large Entity	Small Entity	Total
Design filing fee	\$210.00	\$105.00	\$0.00
Reissue filing fee	\$310.00	\$155.00	\$0.00
Provisional filing fee	\$210.00	\$105.00	\$0.00
Total of above Calculations =			\$0.00

## 3. ADDITIONAL FEES

Fee Description	Large Entity	Small Entity	Other
Issue Fee	\$	\$720.00	\$720.00
Publication Fee	\$	\$300.00	\$300.00
	\$	\$	\$
	\$	\$	\$
TOTAL:			\$1,020.00

Name (print/type)	TRAVIS L. DODD	Registration No.: (Attorney/Agent)	42,491
Signature		Date	4/21/2008

## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail Stop ISSUE FEE**  
**Commissioner for Patents**  
**P.O. Box 1450**  
**Alexandria, Virginia 22313-1450**  
 or **Fax (571)-273-2885**

**INSTRUCTIONS:** This form should be used for transmitting the **ISSUE FEE** and **PUBLICATION FEE** (if required). Blocks 1 through 5 should be completed where applicable. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as shown on this form unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

**CURRENT CORRESPONDENCE ADDRESS** (Note: Use Block 1 for any change of address)

31815 7590 01/28/2008

**MARY ELIZABETH BUSH**  
**QUALLION LLC**  
**P.O. BOX 923127**  
**SYLMAR, CA 91392-3127**

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

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(Depositor's name)
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(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/666,379	09/17/2003	David M. Skinko	Q137-US10	8949

**TITLE OF INVENTION:** ELECTRIC STORAGE BATTERY CONSTRUCTION AND METHOD OF MANUFACTURE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$720	\$300	\$0	\$1020	04/28/2008
EXAMINER		ART UNIT	CLASS-SUBCLASS			
PARSONS, THOMAS H		1795	429-094000			
				01 FC:2501		720.00 OP
				02 FC:1504		300.00 OP

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

Gavrilovich Dadd  
 & Lindsey, LLP

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Quallion LLC

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Sylmar, CA

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

- ☒ Issue Fee  
☒ Publication Fee (No small entity discount permitted)  
☐ Advance Order - # of Copies

4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)

- ☐ A check is enclosed.  
☒ Payment by credit card. Form PTO-2038 is attached.  
☒ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 52-0721 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☒ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

*Paul Beach*

Date 4/21/08

Typed or printed name

Paul Beach

Registration No.

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